

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SHORE PAC

ADDRESS (number and street)

PO Box 3157

Check if different  
than previously  
reported. (ACC)

Long Branch

NJ

07740

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00410308

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☒ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2017

through

M M M / D D D / Y Y Y Y Y Y  
04 30 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Goode, Warren, B, ,

Type or Print Name of Treasurer

Signature of Treasurer

Goode, Warren, B, ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
05 20 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

SHORE PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
04 / 30 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2017</span>		<span style="border: 1px solid black; padding: 2px;">55353.90</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">116470.87</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">-2850.00</span>	<span style="border: 1px solid black; padding: 2px;">109300.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">113620.87</span>	<span style="border: 1px solid black; padding: 2px;">164653.90</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">29050.16</span>	<span style="border: 1px solid black; padding: 2px;">80083.19</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">84570.71</span>	<span style="border: 1px solid black; padding: 2px;">84570.71</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**SHORE PAC**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	1		2	0	1	7		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	7		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	650.00	13650.00
(ii) Unitemized .....	0.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	650.00	13800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	-3500.00	95500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	-2850.00	109300.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	-2850.00	109300.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	-2850.00	109300.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	20300.16	29583.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	20300.16	29583.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8750.00	49500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29050.16	80083.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29050.16	80083.19

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	-2850.00	109300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	-2850.00	109300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	20300.16	29583.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	20300.16	29583.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SHORE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gregorian, Jamie, , ,

Mailing Address 215 17th Street NE

City  
Washington

State  
DC

Zip Code  
20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Biotechnology Innovation Organization

Occupation (for Individual)  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) Annual

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2017

Transaction ID : 11ai-000040185

Amount of Each Receipt this Period

150.00

☐ Memo Item

Earmarked Contribution Through ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wojciak, Adam, J., ,

Mailing Address 3030 Beechwood Lane

City  
Falls Church

State  
VA

Zip Code  
22042-3138

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol Hill Strategies LLC

Occupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) Annual

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2017

Transaction ID : 11ai-000040186

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution Through ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

650.00

TOTAL This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 17

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ISRI PAC**

Mailing Address 1615 L Street NW

City  
Washington

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

**C** C00046086

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ☐ Annual

Aggregate Year-to-Date ▼

0.00

Date of Receipt

**04** / **04** / **2017**

**Transaction ID : 11c-000040187**

Amount of Each Receipt this Period

-3500.00

☐ Memo Item

NSF

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ActBlue**

Mailing Address PO Box 382110

City  
Cambridge

State  
MA

Zip Code  
02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ☐ Annual

Aggregate Year-to-Date ▼

12300.00

Date of Receipt

**04** / **09** / **2017**

**Transaction ID : 11c-000040183**

Amount of Each Receipt this Period

150.00

☒ Memo Item

Conduit Contributions Through ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ActBlue**

Mailing Address PO Box 382110

City  
Cambridge

State  
MA

Zip Code  
02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ☐ Annual

Aggregate Year-to-Date ▼

12800.00

Date of Receipt

**04** / **30** / **2017**

**Transaction ID : 11c-000040184**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contributions Through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

-3500.00

-3500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101Purpose of Disbursement  
See Memo Items

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

18700.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Andaz Hotel**

Mailing Address 14 Barnard Street

City  
SavannahState  
GAZip Code  
31401Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

6672.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. We The Pizza**

Mailing Address 305 Pennsylvania Avenue SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

705.89

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

18700.43

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. McDonald's Restaurant**

Mailing Address 400 C Street SW

City  
WashingtonState  
DCZip Code  
20024Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

228.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. James Candy Company**

Mailing Address 1519 Boardwalk

City  
Atlantic CityState  
NJZip Code  
08401Purpose of Disbursement  
Event Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

52.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sav Taxi Service**

Mailing Address 1 West Bay Street

City  
SavannahState  
GAZip Code  
31401Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

45.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. Nando's of the Yards**

Mailing Address 300 Tingey Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

433.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sav Taxi Service**

Mailing Address 1 West Bay Street

City  
SavannahState  
GAZip Code  
31401Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

41.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Budget Car Rental**

Mailing Address 6 Sylvan Way

City  
ParsippanyState  
NJZip Code  
07054Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

82.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. River Street Sweets**

Mailing Address 13 East River Street

City  
SavannahState  
GAZip Code  
31401Purpose of Disbursement  
Event Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

225.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Publix Market**

Mailing Address 5500 Abercorn Street #2

City  
SavannahState  
GAZip Code  
31405Purpose of Disbursement  
Event Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

121.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Vick's on the River**

Mailing Address 26 East Bay Street

City  
SavannahState  
GAZip Code  
31401Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

3583.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. Andaz Hotel**

Mailing Address 14 Barnard Street

City  
SavannahState  
GAZip Code  
31401Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2017  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

4886.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 South Wacker Drive

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2017  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

164.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 South Wacker Drive

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2017  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

200.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 South Wacker Drive

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 South Wacker Drive

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

961.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FedEx Office Print Center**

Mailing Address 715 D St, SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Event Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

103.03

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 South Wacker Drive

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

89.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Safeway Store**

Mailing Address 4203 Davenport Street NW

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

43.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. American Express Travel Agency Services**

Mailing Address Main Street

City  
SpringfieldState  
MOZip Code  
65800Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

8.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 South Wacker Drive

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01459**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Davey Consulting LLC**

Mailing Address 322 17th Street NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify)

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01455**

Amount of Each Disbursement this Period

1012.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Woolley, Jodi, , ,**

Mailing Address 83 Navesink Avenue

City  
RumsonState  
NJZip Code  
07760Purpose of Disbursement  
Rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	7		

FEC Identification Number

**C****Transaction ID : 21b-02-01456**

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1312.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. Carroll, Jeffrey, C, ,**

Mailing Address 1831 Grampion Place

City  
ViennaState  
VAZip Code  
22182Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01457**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City  
CambridgeState  
MAZip Code  
02138Purpose of Disbursement  
Service Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify)

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01462**

Amount of Each Disbursement this Period

5.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City  
CambridgeState  
MAZip Code  
02138Purpose of Disbursement  
Service Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

Annual

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2017

FEC Identification Number

**C****Transaction ID : 21b-02-01462**

Amount of Each Disbursement this Period

19.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

275.68

20288.16



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SHORE PAC**

Full Name (Last, First, Middle Initial)

**A. DCCC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2017

Mailing Address 430 South Capitol Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Annual

FEC Identification Number

C

Transaction ID : 23-02-01458-4

Amount of Each Disbursement this Period

8750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8750.00

**TOTAL** This Period (last page this line number only)..... ►

8750.00